| PATENT APPLICATION FEE DETERMINATION | RECORD |
|--------------------------------------|--------|
| Effective December 29, 1999 | |

09500344

Application or Docket Number

| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY | | | OTHER | | |
|--|--|-----------------|----------------------------------|----------------|-------|--|---|--------------|---------------------|------------------------|-------|---------------------|------------------------|
| _ | | | (Column 1) (Column | | | | ۱ , | TYPE | | OR | SMALL | ENTITY | |
| FOR | | | NUMBER FILED | | | NUMBER EXTRA | | | RATE | FEE | | RATE | FEE |
| BA | SIC FEE | | | | | | 100 100 100 100 100 100 100 100 100 100 | | | 345.00 | OR | | 690.00 |
| TC | TAL CLAIMS | | <u>53</u> | minus 2 | 20= | . 33 | | | X\$ 9= | Ì | OR | X\$18= | 594 |
| INDEPENDENT CLAIMS 3 = 1 | | | | | | | | | X39= | | OR | X78= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | | | +130= | | OR | +260= | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | | TOTAL | | OR | TOTAL | 1084 |
| / CLAIMS AS AMENDED - PART II | | | | | | | | | | | _ | OTHER | THAN |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | ENTITY | OR | SMALL | ENTITY |
| ENT A | | REM AF | AIMS AINING FTER IDMENT | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | • | RATE | ADDI- TIONAL FEE |
| AMENDMENT | Total | . 7 | 8 | Minus | ** | 53 | = 95 | | X\$ 9= | | OR | X\$18= | 450A |
| | Independent | • C | 5 | Minus | *** | 3 | = 2 | | X39= | | OR | x28≦ | 1720 |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | +130= | | OR | +260= | |
| 1/20/20 | | | | | | | | | TOTAL ADDIT, FEE | | OR | TOTAL ADDIT. FEE | 622 pd |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | 7 |
| ENT B | | CL REM AF | AIMS AINING TER IDMENT | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| AMENDMENT | Total | . 7 | 9 | Minus | ** | 78 | = . / | | X\$ 9= | | OR | X\$ 18 ≃ | 50 |
| ME | Independent | • 4 | ė | Minus ' | *** | . 5 | = / . | X39= | | | OR | X78= | 200 |
| _ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | | |
| | | | | | | | | | +130= | | OR | +260= | |
| | | | | | | | | A | TOTAL ODIT. FEE | | OR | TOTAL ADDIT. FEE | 250. |
| Ŀ | | (Col | umn 1) | | | olumn 2) | (Column 3) | | | | | | |
| ENT C | | REM AF | AIMS AINING FTER IDMENT | | PF | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | • | RATE | ADDI- TIONAL FEE |
| Ş | Total | | | Minus | ** | | = | | X\$ 9= | | OR | X\$18= | |
| AMENDMENT | Independent | · _ | | Minus | ••• | | 2 | ľ | X39= | | OR | X78= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | | | | |
| • | If the "Highest Nu | mber Pro | eviously Pa | aid For IN THI | S SP/ | ACE is less tha | n 20, enter "20." | A | TOTAL ODIT. FEE | | OR | TOTAL ADDIT. FEE | |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | |